

Incident Report

Print Date/Time: 06/24/2016 06:30

Login ID: ss0139

Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00011910

 Incident Date/Time:
 6/20/2016 8:44:00 PM

 Location:
 CEDAR RD / 20TH ST NE

LAKE STEVENS WA 98258

Phone Number: (425) 359-1465

Report Required: No Prior Hazards: No LE Case Number:

Incident Type: Collision
Venue: Lake Stevens

 Source:
 911

 Priority:
 3

 Status:
 3

Nature of Call:

Unit/Personnel

 Unit
 Personnel

 19N2
 SS0112-Warbis

 19N3
 SS0135-Parnell

 19S10
 SS0013-Brooks

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	CRAIG					
2	Involved Party	ROBB, CLIFFORD PATRICK	2610 106TH DR	(425) 327-1171	White	Male	01/21/1985
			Lake Stevens WA 982588490				
1	Victim	REED, JEFFREY ALAN	2514 85TH DR	(425) 259-5217		Male	09/05/1953
			Lake Stevens WA 982586423				
1	Involved Party	BRYANT, CYNIKAH ANN	11609 MACHIAS CUTOFF	(425) 290-2035		Female	02/11/1981
			Lake Stevens WA 982589410				

Vehicle(s)

Role Type Year Make Model Color License State

Disposition(s)

Disposition Count

Property

Date Code Type Make Model Description Tag No. Item No.

CAD Narrative

06/20/2016 : 20:49:45 SP0348 Narrative: 2 GRN , ALL INCOMING AID UNITS CXL 06/20/2016 : 20:48:32 SP0348 Narrative: W/ PD, VEHS ON SHOULDER, INVEST

06/20/2016: 20:46:28 SP0325 Narrative: LR325

06/20/2016: 20:46:17 SP0325 Narrative: NON BLKING, BLK TOYT FORERUNNER W/WHI TOP, BGE PC, ND PC

06/20/2016 : 20:45:16 SP0325 Narrative: UNK INJ, 3 VEHS



LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER 2016- 600 11910

VICTIM WITNESS		NON-DIS	CLOSURE	
			CLOSONE	
NAME (LAST, FIRST, MIDDLE RACE ETHNICITY SEX D.C		HGT WGT	HAIR	EYES
CTREET ADDRESS	1-85 7/ 5	510		
7010 106th DR Lake	Steven	STAT		IP 8259
HOME PHONE CELL PHONE	WORK PHON	NE .//	•	020
EMAIL ADDRESS (OPTIONAL)		weeka		
	PLACE OF EN	VIPLOYMEN I	*	
STATEMENTS				
Priving down cepar toward 2 of	n, Gla	are		
in eyes contached tell wight		orper		
	with A	Cront		
right side of tovota fi		. 0.71		
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	1			
I CERTIFY (OR DECLARE) UNDER PENALTY OF PURJURY UNDER THE STATE OF WASHINGTON THAT	THE FOREGOIN	IG IS TRUE AND	CORRECT	
My w		DATE SIGNI	ED: 0 - / C	0
OFFICER/NUMBER:		DATE SIGNI		2
OUR MISSION STATEMENT, WAS A		11		

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURINGJUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE,
HEALTHY, AND PROSPEROUS COMMUNITY"

Page ___ OF ___



LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER 2016-00011910

Page ___ OF ___

VICTIM WITNESS	NON-DISCLOSURE
NAME (LAST, FIRST, MIDDLE) STREET ADDRESS 15 14 95 th Dy NE Uh HOME PHONE CELL PHONE	
EMAIL ADDRESS (OPTIONAL) STATEMENTS HEALING Wegt on 20	PLACE OF EMPLOYMENT, Century Link
stopped then not je panel of my car.	er 128 herel Toyotz reing me hit rezr loor a quarter
	•
I CERTIFY (OR DECLARE) UNDER PENALTY OF PURJURY UND SIGNATURE:	NDER THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT DATE SIGNED:
OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERT	DATE SIGNED: RVING LIFE, ENSURINGJUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE,

HEALTHY, AND PROSPEROUS COMMUNITY"



LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER 2016-00011910

VICTIM WITNESS					NON-DISC	LOSURE				
NAME (LAST, FIRST, MIDDLE BRYANT CYNLKA H	RACE	ETHNICITY WHITE	2	O.B. AGE	HGT WGT	HAIR EYES				
1,000	ENS CELL PHONE		CITY	STEVENS	STATE					
HOME PHONE		WORK PHONE								
EMAIL ADDRESS (OPTIONAL)		PLACE OF EMPLOYMENT RACITIC STONE CO.								
STATEMENTS		12 (1 14 15 17 19 19 19 19 19 19 19 19 19 19 19 19 19								
	RD & CARE		R., WI	A 1 - 1	,	LOOKED				
	NED FORWAR	D JAN	CAR R	MARTER	D SUDDE	MY,				
FRONT BRUSH GUARD		FT. FX	- 41 4 55 5		V 1	E.				
			277.0	,,,,						
v v										
I CERTIFY (OR DECLARE) UNDER PENALTY OF SIGNATURE:	PURJURY UNDER THE	STATE OF WASH	INGTON THA	T THE FOREGOIN						
. 6 9-					4.20.16):				
OFFICER/NUMBER:					DATE SIGNED):				

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURINGJUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE,
HEALTHY, AND PROSPEROUS COMMUNITY"

Page ___ OF ___

(C)	COLLISION PEROPT INTO INTO INTO INTO INTO INTO INTO INT	0 5 27
	INTERSTATE CITY STREET V FIRE RESULTED CASE # 2016-00011910	
1 1	STATE ROUTE OTHER OTHER LOCAL AGENCY CODING	
2 1	TOTAL# OF OBJECT	1 8 28
.1	TRIBAL RESERVATION M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #	Ħ
3	DATE OF COLLISION 06 - 20 - 2016	
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION V NON-INTERSECTION BLOCK NO.	
4a	MILE POST MILE POST	0 3 29
5	OF (REFERENCE OR CROSS STREET) MILES N E CEDAR RD W V	
	UNIT 01 MOTOR VEHICLE PEDAL- CYCLE DAMAGE THRESHOLD MET VEHICLE PHONE D: 4252902035	0 1 30
6	LAST NAME BRYANT FIRST NAME CYNIKAH MIDDLE INITIAL A	
	STREET 11609 MACHIAS CUTOFF NEW ADDRESS 11609 MACHIAS CUTOFF	
7	CITY LAKE STEVENS ST WA ZIP 982589410	1 2 31
8	CDL RESTRICTIONS ENDORSEMENTS 2	
9 2	DRIVER'S LICENSE # BRYANCA199CJ STATE WA SEX F D.O.B. MMDDYYYY 02 - 11 - 1981	
10 9	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET 2 INJURY 1 CLASS 1	1 2 32
11 2 5	LICENSE PLATE # AMB6590 STATE WA VIN# JTEBU11FX70017349	
12 2 5	TRAILER PLATE # STATE TRAILER PLATE # STATE	
13 4	VES NOV VES NOV VES NOV	0M TO 33
14 4	SHADE IN DAMAGED AREA FRO 3 4	ом то 3 7 ₃₄
15 2	VEHICLE YES NO CITATION # CHARGE O BOTTOM 7 6	
16 2	UNIT 02 MOTOR VEHICLE PEDAL- PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET PHONE D: 4252595217	35
	LAST NAME REED FIRST NAME JEFFREY MIDDLE A INITIAL A	
17	STREET NEW ADDRESS 2514 85TH DR NE UNIT Q2	37
18	CITY LAKE STEVENS ST WA ZIP 982586423	38
19	CDL RESTRICTIONS ENDORSEMENTS L	39
20	DRIVER'S LICENSE # REED*JA4710E STATE WA SEX M D.O.B. MMDDYYYY 09 - 05 - 1953	
21	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET 2 INJURY 1 NATURE OF INJURIES	
22	LICENSE PLATE # AWN8174 STATE WA VIN# 4T1BK36B18U282226	
23	TRAILER PLATE # STATE TRAILER PLATE # STATE 1	41
24	VEH. YEAR 2008 MAKE TOYT MODEL AVA4D STYLE 4D VEHICLE TOWED TOWED BY GOVT. YEHICLE YES NO.	42
	REGISTERED OWNER INFO. JEFFREY REED 2514 85TH DR NE LAKE STEVENS WA 98258 VEHICLE NO. 2 SHADE IN DAMAGEBAREA LIABILITY INSURANCE A POLICY # INSURANCE CO ALLSTATE 964570326 A POLICY # 9 TOP	_
25	IABILITY INSURANCE NISURANCE CO ALLSTATE 964570326 N FFECT VEHICLE YES NO CITATION # CHARGE TO BOTTOM TO	
25	OFFICER'S NAME (PRINT) BADGE OR ID # AGENCY R. BROOKS 0013 WA0311900	
	PART A 3000-345-159 R (7/06)	





CORRECTION

CASE #

REPORT NO.

E555660

2016-00011910

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)																			
NAME ROBB CLIFFORD P																			
ADDRESS & PHONE # 2610 106TH DR NE LAKE STEVENS WA 982588490 4253271171								71			S	SEX	м	D.O.B. MMDDYYYY	']-[21 _		1985
PASSENGER 🗸	WITNESS UN	IIT#	1	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELN USI	IET E	2 INJURY	1		NATURE OF IN	IURIES	
NAME (LAST, FIRST, MIDDLE	INITIAL)																		
ADDRESS & PHONE #											S	SEX	N	D.O.B.		7-[-		
PASSENGER \	WITNESS	IIT#		SEAT POS.		AIRBAG		RESTR.		EJECT		HELN USI		INJURY CLASS	<u> </u>	Ī .	NATURE OF IN	IURIES	
NAME (LAST, FIRST, MIDDLE	INITIAL)																		
ADDRESS & PHONE #	· · · · · · · · · · · · · · · · · · ·										5	SEX		D.O.B.		7_[_		
PASSENGER []	WITNESS UN	IIT#		SEAT		AIRBAG		RESTR.		EJECT		HELM	IET	INJURY	(]	NATURE OF IN	IURIES	
				. 03.			NI A		 \/=			USI	-	CLASS					
NARRATIVE Unit 1 stopped for the stop sign on Cedar Rd. at 20th St. N.E. facing south. Unit 2 was west bound on 20 St. Unit 1 pulled out from the stop sign and struck Unit 2 in the right rear quarter pannel. The driver of Unit 1 said she didn't see Unit 2. Unit 2 did not have any traffic control and did have the right of way. There were no injuries reported. both vehicles were driven from the scene.																			
R. BROOKS NVESTIGATING OFF	FICER'S SIGNATU	RE		UNI	T OR DIST. [DET		DATE		01:30 AM	DATE			SIGNED					
R. BROOKS 0013	3								_			6/21	/2016	6 1:58:55 A	М			_	
BADGE OR ID #	0013		ORI#	WA03	311900				TIN	NE POLICE DI	SPATCH	HED	8:46	PM	TIM	IE PC	DLICE ARRIVE	8:4	9 PM

PART B 3000-345-160 R (7/06)

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REPORT NO. E555660

CASE# 2016-00011910

DATE AND TIME OF COLLISION 06/20/16 20:45

